## Case 15-40751 Doc 2 Filed 11/30/15 Entered 11/30/15 15:31:56 Desc Main Document Page 1 of 2

				Doc	ument	Page 1 of	2			
Fill	in this informat	ion to identify your cas	e:							
	btor 1	Sophia Yvonne B								
		First Name	Mid	dle Name		Last Name				
	btor 2									
(Spouse if, filing) First Name		Mid	liddle Name		Last Name					
United States Bankruptcy Court for the: NORTH		NORTHE	ERN DISTRICT OF ILLI		INOIS					
Ca	se number									
(if known)						_			Check if this amended filir	
	ficial Form									
Αp	plication	for Individuals	to Pay	the Fi	ling Fee	in Installm	eı	nts		12/14
info	ormation.	nd accurate as possib			eople are fili	ing together, both	h a	re equally responsi	ble for supplying cor	rect
	орос.	.,	yo							
1.		er of the Bankruptcy	Code are		Chapter 7					
	you choosin	g to file under?			Chapter 1	1				
					Chapter 1	2				
					Chapter 1	3				
2.		oly to pay the filing fe		You p	propose to p	oay				
	four installments. Fill in the amounts you propose to pay and the dates you plan to									
		e sure all dates are bu								
		dd the payments you				☐ With th	ne fi	iling of the petition		
	to pay.			\$	335.00			ore this date	12/12/15	
				· —		_ 011012	,,,,	oro triio dato	MM / DD/ YYYY	
		pose to pay the entire								
		days after you file this		\$		On or befo	ore	this date	1414 / DD///000/	
	bankruptcy case. If the court approves you application, the court will set your final payment timetable.			\$		On or before		this date	MM / DD/ YYYY	
			iai	Ψ				triis date	MM / DD/ YYYY	-
	, . ,			+ \$		On or befo	ore	this date		
									MM / DD/ YYYY	-
					335.00	1				
Tot		Total	\$		Your total must equal the entire fee			the chanter you check	ed in line 1	
			Total				СЧ		ine chapter you check	
Pa	rt 2: Sign	Below								
-	signing here, y lerstand that:	ou state that you are	unable to	pay the fu	II filing fee	at once, that you	wa	ant to pay the fee in	installments, and tha	at you
	<ul><li>You m</li></ul>	nust pay your entire filir	na fee befo	re vou mal	ke anv more	payments or trans	sfei	r any more property t	o an attorney, bankrur	otcy petition
		rer, or anyone else for					0.0.	, p. op o, .	o an anomo, bannap	rto) potition
		nust pay the entire fee				rst file for bankrup	otcy	, unless the court lat	er extends your deadli	ne. Your
		will not be discharged do not make any paym				au agga may ba di		ioood ood vour right	a in ather hankrunter,	rooodinaa
		e affected.	ient when i	it is due, yo	our bankrupt	cy case may be di	ISM	nissed, and your right	s in other bankruptcy p	proceedings
Х	/s/ Sonhia Y	vonne Bracey	Х				х	/s/ S. M. de Rath	. Esa.	
-	Sophia Yvor		— "-				-	S. M. de Rath, Es		
	Signature of D			Signature	of Debtor 2				ne and signature, if you	used one
	-			-				•	=	

Date

November 13, 2015

MM / DD / YYYY

Date November 13, 2015 MM/ DD / YYYY

Date

MM / DD / YYYY

## Case 15-40751 Doc 2 Filed 11/30/15 Entered 11/30/15 15:31:56 Desc Main

		Document	Pa	ige 2 of 2	
Fill in this information	on to identify your case:				
Debtor 1	Sophia Yvonne Br				
Debtor 2	First Name	Middle Name	Last	Name	
(Spouse if, filing)	First Name	Middle Name	Last	Name	
United States Bank	ruptcy Court for the:	NORTHERN DISTRICT C	F ILLIN	IOIS	
Case number (if kn Chapter filing under			- - -	Chapter 7 Chapter 11 Chapter 12	
				Chapter 13	
Order Appro	ving Payment o	Filing Fee in Insta	llme	nts	
After considering that:	g the <i>Application for</i>	Individuals to Pay the Fi	ling F	ee in Installments (Of	ficial Form B 3A), the court orders
☐ The debtor(s)	may pay the filing fe	e in installments on the	terms	proposed in the app	lication.
☐ The debtor(s)	must pay the filing f	ee according to the follo	wing t	erms:	
Y	ou must pay	On or befo	ore th	is date	
\$					
Ψ		Month / da	y / yea	ar	
\$					
•		Month / da	y / yea	ar	
\$					
·		Month / da	y / yea	ar	
+ \$					
Г		Month / da	y / yea	ar	
Total \$					
		ebtor(s) must not make vices in connection with			transfer any additional property to

United States Bankruptcy Judge

By the court:

Month / day / year